TO:      DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
         DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
         FAMILY INVESTMENT SUPERVISORS/ELIGIBILITY STAFF

FROM:    ROBERT EVERHARD, EXECUTIVE DIRECTOR, FIA
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RE:      MEDICAL ASSISTANCE OUTREACH AND ENROLLMENT

PROGRMS  AFFECTED:  MEDICAL ASSISTANCE & TEMPORARY CASH ASSISTANCE

ORIGINATING OFFICE:  OFFICE OF POLICY, RESEARCH AND SYSTEMS

SUMMARY:  The dramatic changes in welfare laws and policies, and the challenges
          and opportunities they continue to present, require that Maryland’s efforts to ensure that as
          many children and families as possible retain or obtain health care coverage, continue. To
          achieve this result, we need to ensure that the policies and procedures in place are carried
          out efficiently and that we find new ways to reach children and families.

Medical Assistance is an essential element in Maryland’s efforts to prepare Temporary
Cash Assistance (TCA) customers for independence and plays a critical role in Maryland’s
job retention strategies. Therefore, in continuing our efforts to assure we are all carrying
out the procedures as set forth, the following guidance is provided.

Families whose TCA case has been denied or closed frequently qualify for MA. Applicants
who fail to follow up the TCA application must be provided a separate determination of MA
eligibility. A separate application for Medical Assistance is **not** required. Families
whose earnings cause them to become ineligible for TCA continue to qualify for MA for an
additional 12 months. Cases that are closed for excess spousal or child support income
are eligible for a four-month extension of MA. Families who leave cash assistance for
other reasons are entitled to a separate redetermination of MA eligibility.
ACTION REQUIRED:

FIA case managers must take the following steps when denying or closing a TCA case to ensure that eligibility for all MA programs is considered separately:

TEMPORARY CASH ASSISTANCE DENIALS

When a customer who applied for TCA has been determined ineligible for TCA, complete the determination of eligibility for MA.

If the case is ineligible for TCA, and the case is processed timely, the TCA case will be denied with a system generated denial code, and should automatically sprout from F01 to the appropriate MA coverage group for an MA determination. If it does not, the case manager, based on information received at the face-to-face interview, must determine eligibility for the Families and Children’s program (FAC) provided they have all required documentation. If the documentation is not sufficient to determine eligibility for FAC, or if the case is ineligible for another reason in FAC, or if the case is preserved for spenddown in FAC, the case manager must determine eligibility for the Maryland Children’s Health Program (MCHP) based on information captured at interview. Establish eligibility from the base coverage group for each program, (i.e. F05 for FAC, P06 for MCHP children, P02 for pregnant women) allowing the case to trickle to the appropriate coverage group.

When a TCA case is denied and was not processed timely, or if the case is ineligible in the FAC track, or preserved for spenddown:

- Re-screen (Option “J”) the TCA AU.
- Complete the interview, process, and finalization procedures (Options “O”, “P”, and “Q”).
- During finalization of the TCA AU, (Option “Q”), PF13 from the CAFI screen and add the following text “You have been determined ineligible for Temporary Cash Assistance. However, your eligibility for Medical Assistance is being reviewed and you will receive a separate notice of eligibility for that program.”
- If the case is eligible for F05 or F98, finalize (option “Q”).
- If the case is denied in FAC, it should be tested for MCHP. This is also true if the case trickles to a spenddown (F99, M status – preserved). If the case trickles to F99, preserved, confirm the spenddown so that the adults in the unit may potentially qualify for MA. For a case that is either denied or preserved in the FAC track, rescreen the case for MCHP children in P06 and for pregnant women in P02.
- From AMEN, add a program (Option “L”) for MCHP.
- Complete the interview, process, and finalization procedures (Options “O”, “P” and “Q”) for the MCHP/PW AU(s).
- Suppress system-generated denial notices. The notice for spenddown should be generated. Complete manual MCHP eligibility notices.
- Narrate case activity.
TEMPORARY CASH ASSISTANCE CLOSINGS

Failure to Comply with TCA Redetermination Requirements:

Routine redetermination for TCA may occur at 4, 6, or 12 months. If the customer fails to appear or submit required verifications for continued TCA eligibility at the time of a scheduled or unscheduled TCA redetermination, TCA benefits will be terminated. However, eligibility for MA must continue unless it has been determined that the case is ineligible for MA. At a 4 month or an unscheduled TCA redetermination, which does not coincide with a scheduled 6 month MA redetermination, a new application form for redetermination of Medical Assistance is not required. The case manager must always redetermine eligibility for other MA coverage groups in a timely manner. Remember to pend the MA AU from the base coverage group (i.e. F05, P06, P02) to allow the case to trickle to the appropriate coverage group. Follow the steps below:

Redetermination appointment not kept:

Face to face interviews are not required for MA redetermination, therefore at routine 6 or 12 month redeterminations the case manager must generate a letter informing the customer that, even if they are not interested in continuing TCA, eligibility for Medical Assistance may exist, and enclose an application (9701 form). Request that the customer complete the application and mail it to the local department along with any required verifications, for a redetermination of MA eligibility. If the customer requests a second TCA appointment but fails to appear but returns the application with or without the requested verifications, the case manager must review the application and redetermine MA eligibility.

Upon receipt of the application the case manager shall:

- From AMEN, select Option “J” to obtain an MA AU number. Pend an FAC (F05) AU if all needed verifications for that program are returned. If not, pend MCHP AU(s) (P06 for children, P02 for pregnant women).
- Complete interview, process, and finalization procedures (Options “O”, “P” and “Q”).
- On the MA1 screen, add text “You failed to appear for your scheduled redetermination for TCA. However, eligibility for MA has been redetermined.”
- If the case is denied in FAC, it should be tested for MCHP. This is also true if the case trickles to a spenddown (F99, M status-preserved) If the case trickles to F99, preserved, confirm the spenddown so that the adults in the unit may potentially qualify for MA. For a case that is either denied or preserved in the FAC track, rescreen the case for MCHP children in P06, and for pregnant women in P02).
- From AMEN, add-a-program (Option “L”) for MCHP.
- Complete interview, process, and finalization procedures (Options “O”, “P” and “Q”) for the MCHP AU(s).
- Suppress system-generated ineligibility notices. Complete manual MCHP eligibility notices.
- Narrate case activity.
If an application is not returned at all, the local department does not have information on which to base an MA eligibility decision:

- Go to (FMEN) and generate letter 0031 (Notice of Action). Add reason “You failed to submit an application to redetermine your eligibility for Medical Assistance.” COMAR 10.09.24.12.

Failure to Comply with Other TCA Program Requirements:

When a customer fails to comply with other TCA program requirements (i.e. failure to participate in a work activity, or failure to provide TCA verification), eligibility for MA must be reviewed separately. If the reason the TCA case is being closed is not a condition of MA eligibility, the MA case may not be closed. Remember to pend the MA AU from the base coverage group (i.e. F05, P06, P02) to allow the case to trickle to the appropriate coverage group.

When entering the reason code pertinent to the TCA program violation, the case manager shall:

- Prior to closure of the case, PF13 from the CAFI screen and add the following text “Your TCA benefit will terminate due to failure to comply with the following program requirement(s): (i.e. work activity, etc.). However, eligibility for Medical Assistance is being reviewed. You will receive a separate notice of eligibility for that program.”
- From AMEN, add a program (Option “L”) to the existing TCA AU for FAC (F05).
- If the redetermination was not completed timely, screen (Option “J”) for FAC (F05).
- Complete interview, process, and finalization procedures (Options “O”, “P” and “Q”).
- If the FAC AU is denied, or trickles to F99 (M status – preserved), confirm spenddown for F99; and determine eligibility for MCHP/PW (P06 for children, P02 for pregnant women).
- From AMEN, add a program (Option “L”) for MCHP (P06).
- Complete interview, process, and finalization procedures (Options “O”, “P” and “Q”).
- Suppress system-generated notices of ineligibility. Complete manual MCHP eligibility notices.
- Narrate case activity.

Transitional Medical Assistance:

When a TCA customer’s earnings make them ineligible for TCA, if they have received three months of TCA in the preceding six months, or requested MA IN LIEU OF TCA (see AT#97-74) the family is eligible for Transitional Medical Assistance (TMA) for 12 months. When a customer notifies the local department that he or she wishes to close the TCA case but fails to give a reason, the case manager must try to find out the reason, before closing the case. Ask the customer “Have you gotten a job?” Advise the customer of the potential for continued MA eligibility.
The customer is automatically approved for TMA when the system closes the TCA case due to earnings. **Do not use 500 level codes** to close a case that may have earnings; these codes will not test eligibility for Medical Assistance programs.

When the case manager receives employment information/verification:

- Enter the information on the ERN1 and ERN2 screens.
- Recalculate eligibility on the MISC screen.
- If the earnings cause the case to close, the TCA ELIG screen will display the closure code 301 and another ELIG screen will appear that displays the MA AU number for the extension.
- The MA extension AU will be in coverage group F02.
- If the case has been known to CARES less than 3 months and closes for 301, it will trickle to an F99. If this happens, review the case to confirm that the customer **did not** receive TCA or MA in lieu of TCA for at least three of the last six months. If the customer has not, then the case has **trickled appropriately** to F99. Rescreen the case for MCHP eligibility (P06, P02).
- From AMEN, add-a-program (Option “L”) for MCHP.
- Complete interview, process, and finalization procedures (Options “O”, “P” and “Q”).
- Suppress system-generated notices of ineligibility. Complete manual MCHP eligibility notices.
- **Narrate case activity.**
  - If the case trickles to F99 but the customer **did** receive 3 months of TCA or MA in lieu of TCA in the last six months the case has trickled to F99 in error.
  - PF3 to AMEN, select “L”, add-a-program, using TCA AU to obtain a new MA (FAC) AU. The new AU will be F05 that becomes a substitute for the MA extension that did not sprout.
  - Complete interview, process, and finalization procedures (Options “O”, “P” and “Q”).
  - Enter the earnings as “FS” (food stamp countable only) on ERN1 screen. This ensures that MA will not trickle to spenddown during finalization (Option “Q”).
  - The F05 will set a redetermination for 6 months. Initiate a redetermination to allow the customer 12 months of eligibility.
  - **Add narrative that explains the F05 was completed for the Transitional Medical Assistance extension that did not sprout.**
  - Note: If the TCA has been on at least 3 months and the change is being processed at the end of the month, the case will not display the MA extension until the end of the month that the adverse action period expires.

**Receipt of Excess Spousal/Child Support:**

Families who become ineligible for TCA solely because of increased collection of spousal or child support are eligible for 4 additional months of Medical Assistance. Most cases with excess spousal or child support income are closed automatically during the IVA/IVD interface. These closings occur during the month end batch. A 230 alert is generated to the worker of record for any TCA cases closed with spousal/child support amount greater than TCA. Review all 230 alerts to verify that the customer was
given the extension. If the extension was not given and should have been, complete the following steps:

- Enter the income on the UINC screen coded as CS. If income is overscale the system will generate closure code 302 (child support more than grant) and sprout to F03.
- If the TCA case trickles to an F99, PF3 to AMEN, select Option “L” (add-a-program) using TCA AU to obtain a new MA AU. This will be a F05.
- The F05 becomes a substitute for the MA extension that did not sprout.
- Complete interview, process, and finalization procedures (Options “O”, “P” and “Q”).
- Enter the child support as “FS” (food stamp countable only) on the UINC screen. This ensures the MA will not trickle to spenddown during finalization (Option “Q”).
- Add a narrative that explains the F05 was completed for the Medical Assistance extension that did not sprout.
- Since Medical Assistance eligibility exists for only 4 months in these cases, on the MAFI screen, change the redet end date to reflect the 4-month certification period.

Outreach and Enrollment

DHR, DHMH and the Local Departments of Social Services have begun to work together on statewide outreach and enrollment efforts to ensure that eligibility for MA programs is considered for applicants and recipients of TCA when TCA is denied or closed, and that eligible individuals are enrolled into appropriate coverage groups. These efforts will consist of various strategies to improve processes and increase enrollment into MA programs through systems changes, training, and education, as well as promotional and marketing strategies to better inform eligible populations about Maryland’s Medical Assistance programs.

INQUIRIES: Policy inquiries may be directed to Alice Bey on (410) 767-8557, Deborah Weathers on (410) 767-7994, or Cynthia Davis on (410) 767-7495. System inquiries may be directed to Nicole Pyles on (410) 767-7957.

cc: DHR Executive Staff FIA Management Staff
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